

The Lofts at Clarks Pond

APPLICATION

Part I - Applicant Information			
Applicant Name: <input style="width: 90%;" type="text"/>			
Spouse/CoApplicant Name: <input style="width: 90%;" type="text"/>			
Mailing Address: <input style="width: 90%;" type="text"/>			
City: <input style="width: 80%;" type="text"/>		State: <input style="width: 10%;" type="text"/> Zipcode: <input style="width: 10%;" type="text"/>	
Home Phone: <input style="width: 80%;" type="text"/>		# Persons in Household: <input style="width: 10%;" type="text"/>	
Work /Other Phone: <input style="width: 80%;" type="text"/>			
Household Members - (List ALL Household members, regardless of age, who will occupy the affordable unit)			
Name	Date of Birth	Social Security #	Relationship to Applicant
			Applicant

Part II - Local Preference	
Please review the information package and check below if you qualify for a local preference in the lottery.	
<input style="width: 50%;" type="checkbox"/> My household qualifies for a local preference.	
Category: (Check one);	Household Members who qualify:(list names below)
Current Resident: <input style="width: 80%;" type="text"/>	<input style="width: 90%;" type="text"/>
Family member of Resident: <input style="width: 80%;" type="text"/>	<input style="width: 90%;" type="text"/>
Employee of Town: <input style="width: 80%;" type="text"/>	<input style="width: 90%;" type="text"/>
Employee of Local Business; <input style="width: 80%;" type="text"/>	<input style="width: 90%;" type="text"/>
Please be sure to attach proof of residency (see instructions)	

Part III - Race Information for Applicants			
Optional: Please check the appropriate Race Category for each Household member			
	Applicant	Co-Applicant	Dependent(s)
Native American/Alaskan Native	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
Asian/Pacific Islander	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
African American	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
Hispanic/Latino	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
Cape Verdean	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
White/Non-Minority	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
Other	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

Part IV - First Time Homebuyer Status	
Have you owned a home or joint interest in a home in the three years prior to the date of this application?	
Yes: <input style="width: 80%;" type="text"/>	No: <input style="width: 80%;" type="text"/>
If Yes, Please explain: <input style="width: 90%;" type="text"/>	
<input style="width: 90%;" type="text"/>	
<input style="width: 90%;" type="text"/>	

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Part V - Applicants' Household Income

Applicant's Full Time Occupation: _____

Employer Name: _____

Years Employed: _____

Employer Address: _____

Phone: _____

Supervisor Name: _____

Title: _____

If Paid: Weekly (Attach 5 most recent Paystubs or other documentation) (See instructions)

Amt #1: _____

Amt #2: _____

Amt #3: _____

Amt #4: _____

Annual Total: _____

Bi-Weekly (Attach 3 most recent paystubs or other documentation) (See instructions)

Amt #1: _____

Amt #2: _____

Annual Total: _____

Monthly (Attach 2 most recent paystubs or other documentation) (See instructions)

Amt #1: _____

Amt #2: _____

Annual Total: _____

Co-Applicant's Full Time Occupation: _____

Employer Name: _____

Years Employed: _____

Employer Address: _____

Phone: _____

Supervisor Name: _____

Title: _____

If Paid: Weekly (Attach 5 Paystubs or other documentation)

Amt #1: _____

Amt #2: _____

Amt #3: _____

Amt #4: _____

Annual Total: _____

Bi-Weekly (Attach 3 Paystubs or other documentation)

Amt #1: _____

Amt #2: _____

Annual Total: _____

Monthly (Attach 2 Paystubs or other documentation)

Amt #1: _____

Amt #2: _____

Annual Total: _____

Do Applicant or Co-Applicant have additional (ex: Part time) Income? Circle: Y for Yes, N for No:

Y

N

If yes, Describe Source(s) of Additional Income: _____

(Examples: Welfare(TAFDC), Social Security Income, Pension, Part Time Job, Self-Employment)

If yes, attach documentation (See instructions). and include amounts below.

Applicant/Co-applicant Name: _____

Income Source: _____

If Paid: Weekly (Attach documentation)

Amt #1: _____

Amt #2: _____

Amt #3: _____

Amt #4: _____

Annual Total: _____

Bi-Weekly (Attach documentation)

Amt #1: _____

Amt #2: _____

Annual Total: _____

Monthly (Attach documentation)

Amt #1: _____

Amt #2: _____

Annual Total: _____

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Part V - Income (Continued) - Income from other Household Members			
Do other members of the Household Have Full/Part Time Income? Circle Y for Yes, N for No:			<input type="text" value="Y"/> <input type="text" value="N"/>
(If yes, attach documentation and fill in below):			
Name of Household Member: <input style="width: 90%;" type="text"/>			
Employer Name: <input style="width: 80%;" type="text"/>		Years Employed: <input style="width: 10%;" type="text"/>	
Employer Address: <input style="width: 80%;" type="text"/>		Phone: <input style="width: 20%;" type="text"/>	
Supervisor Name: <input style="width: 80%;" type="text"/>		Title: <input style="width: 20%;" type="text"/>	
If Paid: Weekly (Attach 5 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>	Amt #3: <input style="width: 50%;" type="text"/>	Amt #4: <input style="width: 50%;" type="text"/>
Annual Total: <input style="width: 60%;" type="text"/>			
Bi-Weekly (Attach 3 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>		
Annual Total: <input style="width: 60%;" type="text"/>			
Monthly (Attach 2 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>		
Annual Total: <input style="width: 60%;" type="text"/>			
Name of Household Member: <input style="width: 90%;" type="text"/>			
Employer Name: <input style="width: 80%;" type="text"/>		Years Employed: <input style="width: 10%;" type="text"/>	
Employer Address: <input style="width: 80%;" type="text"/>		Phone: <input style="width: 20%;" type="text"/>	
Supervisor Name: <input style="width: 80%;" type="text"/>		Title: <input style="width: 20%;" type="text"/>	
If Paid: Weekly (Attach 5 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>	Amt #3: <input style="width: 50%;" type="text"/>	Amt #4: <input style="width: 50%;" type="text"/>
Annual Total: <input style="width: 60%;" type="text"/>			
Bi-Weekly (Attach 3 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>		
Annual Total: <input style="width: 60%;" type="text"/>			
Monthly (Attach 2 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>		
Annual Total: <input style="width: 60%;" type="text"/>			
Name of Household Member: <input style="width: 90%;" type="text"/>			
Employer Name: <input style="width: 80%;" type="text"/>		Years Employed: <input style="width: 10%;" type="text"/>	
Employer Address: <input style="width: 80%;" type="text"/>		Phone: <input style="width: 20%;" type="text"/>	
Supervisor Name: <input style="width: 80%;" type="text"/>		Title: <input style="width: 20%;" type="text"/>	
If Paid: Weekly (Attach 5 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>	Amt #3: <input style="width: 50%;" type="text"/>	Amt #4: <input style="width: 50%;" type="text"/>
Annual Total: <input style="width: 60%;" type="text"/>			
Bi-Weekly (Attach 3 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>		
Annual Total: <input style="width: 60%;" type="text"/>			
Monthly (Attach 2 Paystubs or other documentation)			
Amt #1: <input style="width: 50%;" type="text"/>	Amt #2: <input style="width: 50%;" type="text"/>		
Annual Total: <input style="width: 60%;" type="text"/>			

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Part VI - Asset Income				
(Attach statements for last 6 months and enter amounts below)(Round to nearest dollar)				
Name on Account: _____				
Enter Info and Balances Below (See Instructions)				
Bank/Brokerage Name	Bank/Brokerage Address	Account Type (See Instructions)	Interest Rate %	Current Balance
Total Assets:				
Name on Account: _____				
Enter Info and Balances Below (See Instructions)				
Bank/Brokerage Name	Bank/Brokerage Address	Account Type (See Instructions)	Interest Rate %	Current Balance
Total Assets:				
Name on Account: _____				
Enter Info and Balances Below (See Instructions)				
Bank/Brokerage Name	Bank/Brokerage Address	Account Type (See Instructions)	Interest Rate %	Current Balance
Total Assets:				
Total Value of Assets:				
If Total Value of Assets greater than \$5,000, multiply by 2.5%				

Part VII - Adult Full-Time Student		
Is any member of the Owner's Household over age 18 a full time student? (Circle)		Y N
If yes, list name(s) of full time students:	Name: _____	Name: _____
for each, list school attending:	School: _____	School: _____
(Attach a letter from each school verifying the student is enrolled full-time)		

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Part VIII - Applicant Signatures and Authorizations

I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge.

I/We Understand that only applications that are complete and eligible under the guidelines and that contain all necessary documentation and certifications will be entered into the lottery. (See list of enclosures required)

Applicant Signature: _____

Date: _____

Co-Applicant Signature: _____

Date: _____

Please submit this application along with ALL of the listed documents in a single large (9x12" or 11x14") envelope to: **COMMUNITY DEVELOPMENT STRATEGIES, P.O. Box XXXX, SOMERVILLE, MA 02143. MARK THE ENVELOPE "CLARKS POND APPLICATION"**

Required Enclosures; (DO NOT ENCLOSE ORIGINALS. COPIES ONLY).

	Signed Disclosure Form from Information Package (Check all appropriate items and sign)
	Signed Deed Rider Signature of Understanding Form from Information Package
	Proof of Eligibility if claiming Local Preference (current utility bill, etc.)
	Mortgage Pre-Approval Letter from a Bank or Mortgage Company showing the Applicant is pre-approved for a mortgage sufficient to purchase a home valued at \$150,000 (1 Bedroom) or \$170,000 (2 Bedroom) (Please note that a Pre-Qualification Letter will NOT be accepted).
	If an adult member of the applicant household is a full-time student, a letter from the school or college stating enrollment status and anticipated date of graduation.
	Income Documentation for all members of the Applicant Household (not just the applicant and co-applicant) as outlined below: Note all documentation should be for most current time period.
	Proof of Wage Income (5 most recent paystubs OR salary verification letter on employer stationary, signed by an authorized individual) (for each job - and each household member)
	Proof of Social Security, Disability, SSI, TANF, Veterans Benefits, Unemployment Compensation, or other government benefits in the form of a letter from the appropriate agency. (for each member of the household receiving such benefits)
	Complete Tax Returns for the past three years, including W2's, 1099's all schedules and other attachments for each member of the Applicant Household
	For Self-Employment income, submit Income and Expense data certified by an independent accountant for the past two quarters
	Proof of Alimony or Child Support in the form of a Divorce or Settlement Agreement, or other documentation showing the amounts received and schedule of payments.
	Documentation of income from Pensions, annuities, or other investments in the form of statements, 1099R forms, etc.
	Documentation of Assets owned by any member of the Applicant Household with Valuation. This includes the value of real-estate owned ; investments such as stocks and bonds or mutual fund accounts; Savings and Checking Accounts and Certificates of Deposit (statements);
	Copies of Savings and Checking Account Statements (or copies of passbook pages) for each Account held by a member of the Applicant Household for the most recent 6 months.
	Copies of Investment Account Statements (3 most recent) for each Account held by a member of the Applicant Household
	Appraisal or most recent tax bill for Real Estate owned, stating valuation. If a mortgage exists, include most recent three statements in order to calculate equity value.
	Evidence of funds available for Downpayment and Closing Costs. (May be identified from savings or signed and notarized gift letter from a person or organization providing funds)

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Part IX - APPLICATION REVIEW AND PRE-SCREEN

(This Page for CDS Use Only)

Lottery Pre-Screening

Income Eligibility	
Household Size	Maximum Income
1	\$46,300
2	\$52,950
3	\$59,550
4	\$66,150
5	\$71,450

Total Household Income:

Household Size (# Persons):

Total Household Asset Amount:

Applicant is Income Eligible (Circle Y or N): Y N

Applicant Qualifies as a First Time Homebuyer: Y N

Applicant Qualifies for Residency Preference: Y N

Applicant is a Minority Household: Y N

Applicant is 55 yrs or Older: Y N

Applicant meets Asset Limit Test: Y N

Application is Complete: Y N

Application Received by Deadline: Y N

This Application has been pre-screened by the Community Development Strategies

Excluded (Not eligible/Complete): Y N

Included in Residency Preference Pool: Y N

Included in General Pool: Y N

Lottery Number Assigned:

Reviewed By: _____
Community Development Strategies

Date: _____

LOTTERY RESULTS

This Application was drawn in the Lottery.

Order Chosen in Local Preference Pool:

Order Chosen in General Pool:

Application Sent to Town of Amesbury (Date):

Amesbury Certification Received (Date):

P&S Signed (Date):

Closing Held (Date):

Notes:

The Lofts at Clark's Pond

Disclosure Form

Please check and fill in the following items that apply to you

____ I/We certify that our household is comprised of ____ (insert #) persons.

____ I/We certify that our annual household income is \$_____
(Total income from all household members has been included)

____ I/We certify that my/our total liquid assets do not exceed the asset limit, as defined in the application package.

____ I/We certify that we qualify as first-time homebuyers, as defined in the application package.

____ If applicable, I/We certify that at least one member of our household qualifies under the Local Preference category.

____ If applicable, I/We certify that at least one member of our household qualifies under the Minority Preference category.

____ If applicable, I/We certify that at least one member of our household is disabled and requires a wheelchair accessible or adapted unit.

I/We certify that the information contained in this application is true and accurate to the best of my/our knowledge and belief under full penalty of perjury. I/We understand that perjury will result in disqualification from further consideration.

I/We understand that if selected in the lottery for The Lofts at Clark's Pond Development, this does not guarantee that I/We will be able to purchase a home.

I understand that all application data will be verified and my qualifications will be reviewed in detail.

I/We understand that it is my/our obligation to secure the necessary mortgage for the purchase of the home and all expenses, including closing costs and down payments, are my/our responsibility.

I/We further authorize Clark's Pond LLC. through it's Lottery and Marketing agent, Community Development Strategies as well as the Town of Amesbury, as Contract Monitor, to verify any and all income, asset and other financial information; to verify any and all household, resident location and workplace information and I/we direct any employer, landlord, or financial institution to release any information to The Community Development Strategies and consequently to the project's monitoring agency, for the purpose of determining eligibility for affordable units at The Lofts at Clark's Pond Development.

I/We have completed an application and have reviewed and understood the process that will be used to distribute the available affordable homes at The Lofts at Clark's Pond..

Applicant Signature

Date

Co-Applicant Signature

Date

**Please return this form with your completed application and all attachments to:
Community Development Strategies
70 Summer Street
Somerville, MA 02143**

Complete Application must be received by December 15, 2005 in order to be eligible

The Lofts at Clark's Pond

Deed Rider Signature of Understanding

Deed Rider Affordability and Resale Restrictions

I/We have read the summary of resale restrictions for The Lofts at Clark's Pond Development and agree to the restriction. I/We have been advised that a copy of the Deed Rider is on file at the following locations and available for my/our future review during normal business hours:

- ◆ Amesbury Community and Economic Development Department, Town Hall, 62 Friend Street, Amesbury
- ◆ Amesbury Public Library, 149 Main Street, Amesbury

I/We also understand that, if selected in the lottery to purchase a unit, a full copy of the Deed Rider will be provided to me/us.

Applicant Signature

Date

Co-Applicant Signature

Date